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23117 7590 02/20/2004

NIXON & VANDERHYE, PC
 1100 N GLEBE ROAD
 8TH FLOOR
 ARLINGTON, VA 22201-4714



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(Signature)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/449,924	12/02/1999	DIDIER SAINT-LEGER	2365-12	6893

TITLE OF INVENTION: COSMETIC OR DERMATOLOGICAL COMPOSITION COMPRISING AT LEAST ONE ALKYNYL CARBAMATE AND AT LEAST ONE POLYOL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LAMM, MARINA	1616	424-401000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Nixon & Vanderhye P.C.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

L'OREAL

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Paris, France

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 5

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

B. J. Sadoff

(Date)

4/26/2004

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04/28/2004 FFANIA3 00000026 09449924

01 FC:1501
 02 FC:1504
 03 FC:8001

1330.00 OP
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